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| **UNV Attendance Record Card** | **ANNUAL LEAVE** | **UNCERTIFIED SICK LEAVE** | **CERTIFIED SICK LEAVE** | **COMMENTS** |
| **Year:** | 2024 |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  | Apply as per contract modality leave entitlements for Annual Leave (AL), Certified Sick (CS), Uncertified SicK (US), Family Leave (FEL), etc. **\* UN Official Holidays to be indicated accordingly.** |
| Name | (Family name, First name) |  |  | UVP ID: |  | Closing Balance 2023 |   |   | Closing Balance 202X |   | Closing Balance 202X |   |
|  |  |  |  |  |  |  Credit |  Take |  Adjustment |  Balance |  Credit |  Take |  Adjustment |  Balance |  Credit |  Take |  Adjustment |  Balance |
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|   | 1 | 2 | 3 | 4 | 5 | 6 | 7 | 8 | 9 | 10 | 11 | 12 | 13 | 14 | 15 | 16 | 17 | 18 | 19 | 20 | 21 | 22 | 23 | 24 | 25 | 26 | 27 | 28 | 29 | 30 | 31 |
| Jan |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |  |  |  |
| Feb |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |  |  |  |
| Mar |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |  |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |  |  |  |
| Apr |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |  |  |  |
| May |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |  |  |  |
| Jun |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |  |  |  |
| Jul |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |  |  |  |
| Aug |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |  |  |  |
| Sep |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |  |  |  |
| Oct |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |  |  |  |
| Nov |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |  |  |  |
| Dec |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |  |  |  |
| PRESENT DUTY STATION |   | ENTRY ON DUTY DATE |   |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
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| HOST ENTITY |   |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  | a |  |  |  |  |  |  |  |  |  |  |
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| PLACE OF HOME VISIT (IUNV only) |   |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
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| AL | Annual Leave 1 Day |  | 1/2 AS | Annual Leave 1/2 Day & 1/2 Certified Sick Day |  | **OH** | **UN Official Holiday** |  |  |  |  |  |
| S | Sick Leave 1 Day - Uncertified |  | FEL | Family Emergency Leave (charged to Uncertified Sick Leave) |  | RR | Rest & Recuperation |  |  |  |  |  |
| 1/2A  | Annual Leave 1/2 Day &1/2 worked |  | HL | Home Leave (charged to Annual Leave) |  | M | Maternity Leave |  |  |  |  |  |
| 1/2AU | Annual Leave 1/2 Day &1/2 Uncertified sick |  | FV | Family Visit (charged to Annual Leave |  | P | Paternity Leave |  |  |  |  |  |
| SC | Sick Leave 1 Day - Certified |  | CDO | Compensatory Day Off (Travel) |  | ME | Medical Evacuation (charged to Certified Sick Leave) |  |  |  |  |  |